## South Bend Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Address:	69000 Ouince Rd
	North Liberty, IN
Seizure Location (	check all that apply)
☐ Residence ☐ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
pen air, etc)	
Red Phosphorous/Iodine Reaction(s):	
Tlammable Solvents:	
☐ Water Reactive Metal (Lithium):	
[   Anhydrous Ammonia;	
Hydrochloric Acid Gas Generator(s):	
<u>sels</u>	
	<u>e Information</u> c/Pseudoephedrine Tracking Log crchant Tip ——
gugencies that serve the b	ocation:
Fax: <u>574-6</u>	
M	
	-
Phone 574-235-9406	
	Seizure Location (  Residence Outbuilding Vehicle  pen air, etc)  sels  investigativ Fighedrin Retail/M Other:

This form is to be fixed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sect to the Claudestine Laboratory Team Leader for retention.